

PRINTED: 07/19/2010
FORM APPROVED

Division of Health Care Facilities

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: TN1915	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 07/15/2010
NAME OF PROVIDER OR SUPPLIER MADISON HEALTHCARE			STREET ADDRESS, CITY, STATE, ZIP CODE 431 LARKIN SPRING RD MADISON, TN 37115		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE	
N 001	1200-8-6 Initial Comments An annual Licensure survey and Complaint investigation #'s 25683, 25839, 25898, and 26036, were completed on July 13, 2010, through July 15, 2010, at Madison Healthcare. Deficiencies were cited related to the Licensure survey under Chapter 1200-8-6, Standards for Nursing Homes. No Licensure deficiencies were cited related to the Complaint investigations.	N 001	<i>This Plan of Correction is the center's credible allegation of compliance.</i> <i>Preparation and/or execution of this plan of correction does not constitute admission or agreement by the provider of the truth of the facts alleged or conclusions set forth in the statement of deficiencies. The plan of correction is prepared and/or executed solely because it is required by the provisions of federal and state law.</i>		
N 767	1200-8-6-.06(9)(i) Basic Services (9) Food and Dietetic Services. (i) Food shall be protected from dust, flies, rodents, unnecessary handling, droplet infection, overhead leakage and other sources of contamination whether in storage or while being prepared and served and/or transported through hallways. This Rule is not met as evidenced by: Based on observation and interview the facility failed to maintain kitchen equipment in a sanitary manner. The findings included: Observation on July 13, 2010, beginning at 10:28 a.m. and 3:45 p.m., of the dietary department equipment revealed the following: 1.) The can opener blade and slot had a build-up of dried and sticky debris. The can opener base was not attached flush to the table	N 767	N767 It is the practice of this facility to protect food from dust, flies, rodents, unnecessary handling, droplet infection, overhead leakage and other sources of contamination whether in storage or while being prepared and served and/or transported through hallways. 1. The can opener blade and slot were cleaned of dried and sticky debris, July 13, 2010. The can opener will be mounted flush to the table and sealed to prevent debris from collecting and building on the underside of the base by 8/10/2010. 2. July 13, 2010 the blades on the slicer were cleaned of dried debris, the food slide was cleaned of a black greasy smear, and the food holder and attachments and cleats were properly cleaned. 3. July 15, 2010 the range top burners, back-splash were cleaned of blackened debris and spill pan cleaned of dried, burnt food debris, and black debris. 4. July 14, 2010 The inside and floor of the reach-in refrigerator, with built-in rack containing tray line food items was cleaned of and accumulation of debris. The sanitizer mechanism was immediately repaired by an EcoLab technician prior to the next meal to be served on July 14, 2010	8/17/2010	

Division of Health Care Facilities

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

STATE FORM

0290

GDN11

If continuation sheet 1 of 7

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N 767	<p>Continued From page 1</p> <p>top and had a build-up of dried and greasy debris on the underside of the base and the table surface.</p> <p>2.) The slicer was covered with a plastic bag. Further observation revealed the slicer had dried debris attached to both sides of the blade. The food slide had a black greasy smear. The food holder attachment and cleats had dried particles attached.</p> <p>3.) The range top, burners and back-splash had a thick accumulation of blackened debris. The range spill pan had a deep layer of dried, burnt food debris including a heavy accumulation of black debris on the surface of the foil lining and the surface of the spill pan.</p> <p>4.) The reach-in refrigerator, with built-in racks, containing tray line food items and produce, had an accumulation of debris built-up on the floor of the refrigeration unit.</p> <p>Interview, with the Dietary Manager, present during the above observations on July 13, 2010, beginning at 10:28 a.m., and 3:45 p.m., confirmed the can opener blade, slot and underside of the base and table surface had dried, sticky, and greasy debris present. Further interview revealed the slicer was covered with plastic because it was clean and ready to use. Further interview confirmed both sides of the slicer had dried debris attached to the blade. Continued interview confirmed the slicer food slide had a black greasy smear and the food holder attachment and cleats had dried particles attached. Continued interview confirmed the range top, burners and back-splash had a thick accumulation of blackened debris. Further interview confirmed the range spill pan had a</p>	N 767	<p><i>This Plan of Correction is the center's credible allegation of compliance.</i></p> <p><i>Preparation and/or execution of this plan of correction does not constitute admission or agreement by the provider of the truth of the facts alleged or conclusions set forth in the statement of deficiencies. The plan of correction is prepared and/or executed solely because it is required by the provisions of federal and state law.</i></p> <p>N767 Continued and dishes rewashed prior to ensure they were properly sanitized.</p> <p>Re-training of the dietary staff was completed by the Dietary Manager (DM) on July 22, 2010 regarding storing, preparing, distributing and serving food under sanitary condition, preheating steam table and maintaining resident tray line food at or above 140 degrees Fahrenheit (F), documenting dish machine temperatures and test results three times daily, with every meal cycle, and notifying DM immediately of any supplies needed to assure storing, preparing, distribution and serving food are done under sanitary conditions. Failure for staff to follow policy and procedures for storing, preparing, distributing, and serving food under sanitary conditions will lead to disciplinary actions up to and including termination.</p> <p>The DM and Registered Dietician (RD) will review the cleaning schedule on July 29, 2010 and make necessary adjustments. The DM will re-educate staff August 1, 2010 regarding cleaning schedule and accountability to follow schedule. The DM will utilize the Nutrition Services: "Quick Rounds" PI tool five days a week for one</p>		

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

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N 767

N 767 Continued

month or until substantial compliance has been achieved and determine adherence to policy and procedures then 3-5 days a week thereafter. Quick Rounds will be done by the ED weekly. The RD will make weekly rounds with the DM utilizing the Nutrition Services: "Quick Rounds" PI tool each visit and issues identified will be corrected immediately. The DM will complete the Nutrition Services: "Sanitation/Food Safety Checklist", "Evaluation Summary", and "Evaluation Dining Review" PI tools monthly and the RD will review monthly for recommendations as needed. The DM will report the results of these PI tools, along with any corrective and/or disciplinary action to the facility performance improvement committee (Administrator, DNS, Maintenance Supervisor, and Medical Director at least quarterly) at its monthly meeting for review and recommendations as needed.

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N 767	Continued From page 2 deep layer of dried, burnt food debris including a heavy accumulation of black debris on the surface of the foil and the surface of the spill pan. Further interview confirmed the reach-in refrigerator, with built-in racks, had an accumulation of debris on the unit floor.	N 767	<i>This Plan of Correction is the center's credible allegation of compliance.</i> <i>Preparation and/or execution of this plan of correction does not constitute admission or agreement by the provider of the truth of the facts alleged or conclusions set forth in the statement of deficiencies. The plan of correction is prepared and/or executed solely because it is required by the provisions of federal and state law.</i>		
N 769	12CJ-8-6-.06(9)(j) Basic Services (9) Food and Dietetic Services. (j) Prepared foods shall be kept hot (140°F or above) or cold (45°F or less). This Rule is not met as evidenced by: Based on observation and interview the facility failed to maintain resident tray line food at or above 140 degrees Fahrenheit (F). The findings included: Observation on July 14, 2010, at 11:34 a.m., in the Ruby Room dining room revealed the dietary cook obtaining the food temperatures. Observation revealed the chicken livers in gravy were: 130 degrees F, potato wedges were 140 degrees F, pureed potatoes and pureed meat were: 120 degrees F. The food items were removed at 11:43 a.m. to be reheated in the main kitchen. Observation on July 14, 2010, at 11:54 a.m., revealed the food items placed back in the Ruby Room dining room steam table. Observation revealed the dietary cook obtaining the following temperatures: potato wedges and pureed meat were 120 degrees F. Further observation revealed two steam table wells were set on 4 and the center well was set on 5 of 7 levels (7 being the hottest setting). Further observation revealed the wells and burners were not hot to the touch.	N 769	N 769 It is the practice of this facility for prepared foods to be kept hot (140 F or above) or cold (45 F or less). Re-training of the dietary staff was completed by the Dietary Manager (DM) on July 22, 2010 regarding storing, preparing, distributing and serving food under sanitary condition, preheating steam table and maintaining resident tray line food at or above 140 degrees Fahrenheit (F), documenting dish machine temperatures and test results three times daily, with every meal cycle, and notifying DM immediately of any supplies needed to assure storing, preparing, distribution and serving food are done under sanitary conditions. Failure for staff to follow policy and procedures for storing, preparing, distributing, and serving food under sanitary conditions will lead to disciplinary actions up to and including termination. The DM and Registered Dietician (RD) will review the cleaning schedule on July 29, 2010 and make necessary adjustments. The DM will re-educate staff August 1, 2010 regarding cleaning schedule and	8/17/2010	

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N 769	Continued From page 3 Observation on July 14, 2010, at 12:05 p.m., revealed the Maintenance Director checking the operational status of the steam table in the Ruby Room dining room. Interview with the Dietary Manager, present during the obtaining of food temperatures, and the cook obtaining the temperatures, in the Ruby Room on July 14, 2010, beginning at 11:34 a.m., confirmed the chicken livers in gravy were 130 degrees F, potato wedges were 140 degrees F, pureed potatoes and pureed meat were 120 degrees F. Further interview revealed the potato wedges had been removed to be reheated because they were at the lowest acceptable temperature. Further interview confirmed the food was reheated, returned to the dining room steam table with temperatures of 120 degrees F for the potato wedges and the pureed meat. Continued interview confirmed the steam table wells were set on 4 and 5 of 7 and the wells and burners were not hot to the touch. Interview, with the Maintenance Director at 12:05 p.m. and the Administrator at 1:30 p.m., on July 14, 2010, in the Ruby Room dining room, revealed the steam table was operating properly but needed fifteen minutes to heat before food was placed in wells in order to maintain the temperature.	N 769	<i>This Plan of Correction is the center's credible allegation of compliance.</i> <i>Preparation and/or execution of this plan of correction does not constitute admission or agreement by the provider of the truth of the facts alleged or conclusions set forth in the statement of deficiencies. The plan of correction is prepared and/or executed solely because it is required by the provisions of federal and state law.</i> N 769 Continued accountability to follow schedule. The DM will utilize the Nutrition Services: "Quick Rounds" PI tool five days a week for one month or until substantial compliance has been achieved and determine adherence to policy and procedures then 3-5 days a week thereafter. Quick Rounds will be done by the ED weekly. The RD will make weekly rounds with the DM utilizing the Nutrition Services: "Quick Rounds" PI tool each visit and issues identified will be corrected immediately. The DM will complete the Nutrition Services: "Sanitation/Food Safety Checklist", "Evaluation Summary", and "Evaluation Dining Review" PI tools monthly and the RD will review monthly for recommendations as needed. The DM will report the results of these PI tools, along with any corrective and/or disciplinary action to the facility performance improvement committee (Administrator, DNS, Maintenance Supervisor, and Medical Director at least quarterly) at its monthly meeting for review and recommendations as needed.		
N 770	120(-8-6-.06(9)(j) Basic Services (9) Food and Dietetic Services. (j) Appropriate equipment for temperature maintenance, such as hot and cold serving units or insulated containers, shall be used.	N 770		8/17/2010	

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N 770	<p>Continued From page 4</p> <p>This Rule is not met as evidenced by: Based on observation and interview the facility failed to maintain a dietary department two door reach-in refrigerator in a safe operational manner.</p> <p>The findings included:</p> <p>Observations on July 13, 2010, at 10:30 a.m., and 3:45 p.m., and July 14, 2010, at 7:53 a.m., and 1:40 p.m., revealed a two door reach-in refrigerator, with built-in racks, containing tray line items and produce, had pooled water on the floor of the unit and on the rungs of the racks. Further observation revealed water on the floor of the unit was coming over the lip of the floor and coming out of the bottom of the door onto the floor in front of the unit.</p> <p>Interview with the Dietary Manager, present during the observation, on July 13, 2010, at 10:30 a.m. confirmed the two door reach-in refrigerator, with built-in racks, containing tray line items and produce, had pooled water on the floor of the unit and on the rungs of the racks and had water coming out of the door onto the floor. Further interview revealed the maintenance staff had worked on it prior and the problem was condensation build-up.</p> <p>Interview with the Maintenance Director, on July, 13, 2010, at 3:45 p.m., and July 14, 2010, at 1:38 p.m. in front of the two door reach-in refrigerator, with built-in racks, containing tray line items and produce, confirmed the unit was not processing the condensation and the condensation was building up and pooling on the floor and rungs.</p>	N 770	<p><i>This Plan of Correction is the center's credible allegation of compliance.</i></p> <p><i>Preparation and/or execution of this plan of correction does not constitute admission or agreement by the provider of the truth of the facts alleged or conclusions set forth in the statement of deficiencies. The plan of correction is prepared and/or executed solely because it is required by the provisions of federal and state law.</i></p> <p>N 770</p> <p>It is the to have appropriate equipment for temperature maintenance, such as hot and cold serving units or insulated containers, shall be used.</p> <p>The Maintenance Director (MD) made a temporary repair to the two door reach-in refrigerator and called the Hobart Service refrigeration technician. A new two door reach-in was ordered July 26, 2010 as a "maintenance emergency" per facility "Capital Budget Request and Standard Requisition Form" #J741616.</p> <p>The DM will complete "work orders" for the MD on equipment found not operating properly and give a copy to the Executive Director (ED). The MD will advise the ED of dietary equipment not in safe operating condition and an action plan to get the equipment to working order. The Preventive Maintenance (PM) schedule will be followed to assure essential mechanical, electrical, and patient care equipment is in a safe operating condition. The PM program schedule will be maintained by the MD. The MD will report the results of PMs performed according the PM program schedule along with any corrective and/or disciplinary</p>	8/17/2010	
N 771	120C-8-6-.06(9)(k) Basic Services	N 771			

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N/ 770 N770 Continued

action to the facility performance
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N 771	<p>Continued From page 5</p> <p>(9) Food and Dietetic Services.</p> <p>(k) All nursing homes shall have commercial automatic dishwashers approved by the National Sanitation Foundation. Dishwashing machines shall be used according to manufacturer specifications.</p> <p>This Rule is not met as evidenced by: Based on observation and interview the facility failed to sanitize dishes processed through the dish machine.</p> <p>The findings included:</p> <p>Observation, on July 14, 2010, at 1:38 p.m., revealed the dish machine was in operation and staff were stacking dishes into storage units. Observation of the manufacturer's recommendation revealed the chlorine sanitizer was to be a minimum of 50 ppm (parts per million). Observation revealed the dietary employee working the dirty side of the machine obtained a test strip which yielded no results. Observation revealed the same employee repeating the test with a new test strip which also yielded no results.</p> <p>Interview, with the dietary employee obtaining the sanitizer results, on July 14, 2010, at 1:38 p.m., confirmed both test strips did not yield results. Further interview revealed this employee "had ruined a vial of test strips about three days ago and had not tested the dish machine in those three days." Further interview revealed this employee had not informed the Dietary Manager of the "ruined strips." Continued interview revealed the dish machine temperatures and test</p>	N 771	<p><i>This Plan of Correction is the center's credible allegation of compliance.</i></p> <p><i>Preparation and/or execution of this plan of correction does not constitute admission or agreement by the provider of the truth of the facts alleged or conclusions set forth in the statement of deficiencies. The plan of correction is prepared and/or executed solely because it is required by the provisions of federal and state law.</i></p> <p>N 771</p> <p>It is the practice of this facility to have commercial automatic dishwashers approved by the National Sanitation Foundation. Dishwashing machines shall be used according to manufacturer specifications.</p> <p>The sanitizer mechanism was immediately repaired by an EcoLab technician prior to the next meal to be served on July 14, 2010 and dishes rewashed prior to ensure they were properly sanitized.</p> <p>Re-training of the dietary staff was completed by the Dietary Manager (DM) on July 22, 2010 regarding storing, preparing, distributing and serving food under sanitary condition, preheating steam table and maintaining resident ray line food at or above 140 degrees Fahrenheit (F), documenting dish machine temperatures and test results three times daily, with every meal cycle, and notifying DM immediately of any supplies needed to assure storing, preparing, distribution and serving food are done under sanitary conditions. Failure for staff to follow policy and procedures for storing, preparing, distributing, and serving food under sanitary conditions will lead to</p>	8/17/2010	

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N 771	<p>Continued From page 6</p> <p>results were to be documented three times daily, with every meal cycle.</p> <p>Interview, with the Dietary Manager, present during the dish machine operation observations, on July 14, 2010, at 1:38 p.m., confirmed the test strips revealed no results indicating no sanitizer in the sanitizer cycle of the dish machine operation. Further interview revealed there were no dish machine log documentation of the wash and rinse temperatures or the test strip results.</p> <p>Interview, with the Maintenance Director, on July 14, 2010, at 1:40 p.m., revealed the dish machine sanitizer mechanism had malfunctioned and was not pumping the sanitizer into the machine.</p>	N 771	<p><i>This Plan of Correction is the center's credible allegation of compliance.</i></p> <p><i>Preparation and/or execution of this plan of correction does not constitute admission or agreement by the provider of the truth of the facts alleged or conclusions set forth in the statement of deficiencies. The plan of correction is prepared and/or executed solely because it is required by the provisions of federal and state law.</i></p> <p>771 continued</p> <p>disciplinary actions up to and including termination.</p> <p>The DM and Registered Dietician (RD) will review the cleaning schedule on July 29, 2010 and make necessary adjustments. The DM will re-educate staff August 1, 2010 regarding cleaning schedule and accountability to follow schedule. The DM will utilize the Nutrition Services: "Quick Rounds" PI tool five days a week for one month or until substantial compliance has been achieved and determine adherence to policy and procedures then 3-5 days a week thereafter. Quick Rounds will be done by the ED weekly. The RD will make weekly rounds with the DM utilizing the Nutrition Services: "Quick Rounds" PI tool each visit and issues identified will be corrected immediately. The DM will complete the Nutrition Services: "Sanitation/Food Safety Checklist", "Evaluation Summary", and "Evaluation Dining Review" PI tools monthly and the RD will review monthly for recommendations as needed.</p> <p>The DM will report the results of these PI tools, along with any corrective and/or disciplinary action to the facility</p>		

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N 771

771 continued
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Supervisor, and Medical Director at least
quarterly) at its monthly meeting for review
and recommendations as needed.

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